## **TEACHER APPLICATION SUPPLEMENT**

Name:		Date Received:		<del></del>
Student Teaching Please complete the following sect	ion <b>ONLY</b> if you hay	ve less th	nan 3 years regular full-time teaching ei	mnlovment
Experience		lo. of leeks	Describe Type of Situation and W	
School & Location		reeks		
Student Teaching Refere	e <b>nces:</b> Please incl	lude Coo	operating Teachers	
Name	Position		Mailing Address	Telephone
otherwise furnished is true and corredisclosure of my knowledge with resthat any incorrect, incomplete or fals to disqualification from consideratio	ect. I further represe pect to the question of the statements, or info on or discharge at any	nt that s or subject rmation time. I l	any attachments to the application, and all uch answers and information constitute a ct to which the answer or information rela furnished by me during the selection prochereby authorize my former employers to a, to furnish any other information they ma	full and complete tes. I understand ess will subject me give any
implied contract of employment and understand the Cantalician Center f	, if hired, I have the or Learning reserves	right to t s the sar	eplication Supplement does not constitut terminate my employment for any reason ne rights. I understand the Cantalician C "conditions of employment" at any time	at any time. I also Center for Learning
The offer of employment will be revo	oked, or employment loyment will be term	will be t	ment, I will be required to submit to a post erminated, in the event of a positive test reased on adverse information obtained by	esult. Any offer of
Signature of Applicant		 Date		